

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	70385	1/18
O.I.P.E. CLASSIFIER		10	
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SB	#07033	2-1-00

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	3/14/04
2	5/24/04
3	9/5/04
4	9/5/04
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If more than 150 claims or 10 actions  
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